

# CORRECTION TO WATER WELL RECORD (WWC-5)

The following correction(s) was made to the attached WWC-5 log, in order to file the item or to rectify lacking or incorrect information.

Fraction ( 1/4 1/4 1/4) Section-Township-Range changed:

listed as SW NW SW, 34-255-1W

changed to SW NW SW, 34-245-1W

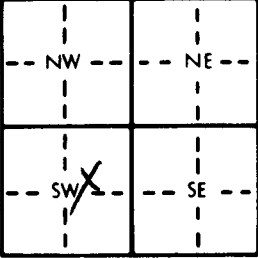
Other changes: Initial statements: \_\_\_\_\_

Changed to: \_\_\_\_\_

Comments: In the town of Sedgwick, KS.

verification method: Written & legal descriptions, similarity to Sedgwick Motors well record nearby, city map on internet, and Sedgwick initials: DRK date: 5/9/2001  
1:24,000 topo. map.

submitted by: Kansas Geological Survey, Data Resources Library, 1930 Constant Ave., Lawrence, KS 66047-3726  
to: Kansas Dept of Health & Environment Bureau of Water Industrial Programs, Bldg 283, Forbes Field, KS 66620

1 LOCATION OF WATER WELL:		Fraction	Section Number	Township Number	Range Number
County: <u>Harvey</u>		<u>SW 1/4 NW 1/4 SW 1/4</u>	<u>34</u>	<u>T 25 S</u>	<u>R 1 E</u>
Distance and direction from nearest town or city street address of well if located within city? <u>NW Corner of Commercial + 4th St</u>					
2 WATER WELL OWNER:		Board of Agriculture, Division of Water Resources			
RR#, St. Address, Box # :		Application Number:			
City, State, ZIP Code :		<u>Wichita, KS 67201-1030</u>			
3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:		4 DEPTH OF COMPLETED WELL: <u>999</u> ft. ELEVATION: _____ ft.			
		Depth(s) Groundwater Encountered <u>1</u> ft. 2. _____ ft. 3. _____ ft.			
		WELL'S STATIC WATER LEVEL <u>999</u> ft. below land surface measured on mo/day/yr <u>11-6-95</u>			
		Pump test data: Well water was _____ ft. after _____ hours pumping _____ gpm			
		Est. Yield _____ gpm: Well water was _____ ft. after _____ hours pumping _____ gpm			
		Bore Hole Diameter _____ in. to _____ ft., and _____ in. to _____ ft.			
		WELL WATER TO BE USED AS: 5 Public water supply 8 Air conditioning 11 Injection well <u>Injection</u>			
		1 Domestic 3 Feedlot 6 Oil field water supply 9 Dewatering 12 Other (Specify below) <u>Well</u>			
		2 Irrigation 4 Industrial 7 Lawn and garden only 10 Monitoring well			
		Was a chemical/bacteriological sample submitted to Department? Yes _____ No <u>X</u> ; If yes, mo/day/yr sample was submitted _____			
		Water Well Disinfected? Yes _____ No <u>X</u>			
5 TYPE OF BLANK CASING USED:		CASING JOINTS: Glued _____ Clamped _____			
1 Steel		5 Wrought iron			
2 <u>PVC</u>		6 Asbestos-Cement			
3 RMP (SR)		7 Fiberglass			
4 <u>ABS</u>		8 Concrete tile			
		9 Other (specify below) _____			
Blank casing diameter _____ in. to _____ ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft.		Welded _____			
Casing height above land surface <u>flush</u> in., weight _____ lbs./ft. Wall thickness or gauge No. _____		<u>Threaded</u> <u>flush</u>			
TYPE OF SCREEN OR PERFORATION MATERIAL:		7 <u>PVC</u> 10 Asbestos-cement			
1 Steel		8 RMP (SR)			
2 Brass		9 ABS			
3 Stainless steel		11 Other (specify) _____			
4 Galvanized steel		12 None used (open hole)			
5 Fiberglass		8 Saw cut 11 None (open hole)			
6 Concrete tile		9 Drilled holes			
SCREEN OR PERFORATION OPENINGS ARE:		10 Other (specify) _____			
1 Continuous slot		5 Gauzed wrapped			
2 Louvered shutter		6 Wire wrapped			
3 <u>Mill slot</u>		7 Torch cut			
4 Key punched		8 Saw cut			
SCREEN-PERFORATED INTERVALS: From <u>999</u> ft. to <u>999</u> ft., From _____ ft. to _____ ft., From _____ ft. to _____ ft., From _____ ft. to _____ ft.		9 Drilled holes			
GRAVEL PACK INTERVALS: From _____ ft. to _____ ft., From _____ ft. to _____ ft., From _____ ft. to _____ ft., From _____ ft. to _____ ft.		10 Other (specify) _____			
6 GROUT MATERIAL:		4 Other _____			
1 Neat cement		3 <u>Bentonite</u>			
2 Cement grout		4 Other _____			
Grout Intervals: From <u>999</u> ft. to <u>0</u> ft., From _____ ft. to _____ ft., From _____ ft. to _____ ft., From _____ ft. to _____ ft.		10 Livestock pens 14 Abandoned water well			
What is the nearest source of possible contamination:		11 Fuel storage 15 Oil well/Gas well			
1 Septic tank		12 Fertilizer storage 16 Other (specify below)			
2 Sewer lines		13 Insecticide storage			
3 Watertight sewer lines		How many feet?			
4 Lateral lines					
5 Cess pool					
6 Seepage pit					
7 Pit privy					
8 Sewage lagoon					
9 Feedyard					
Direction from well?					
FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
			<u>999</u>	<u>0</u>	<u>Bentonite</u>
7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was (1) constructed, (2) reconstructed, or (3) <u>plugged</u> under my jurisdiction and was completed on (mo/day/year) <u>11-6-95</u> and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. <u>531</u> This Water Well Record was completed on (mo/day/yr) <u>6/26/96</u> under the business name of <u>AST</u> by (signature) <u>Allison J. ...</u>					
INSTRUCTIONS: Use typewriter or ball point pen. PLEASE PRESS FIRMLY and PRINT clearly. Please fill in blanks, underline or circle the correct answers. Send top three copies to Kansas Department of Health and Environment, Bureau of Water, Topeka, Kansas 66620-0001. Telephone: 913-296-5545. Send one to WATER WELL OWNER and retain one for your records.					